

Arlington Boys & Girls Club After School

Sixty Pond Lane Arlington, MA 02474 (781) 648 - 1617 ext 219 afterschool@abgclub.org

*PLEASE EMAIL THIS ONE PAGE REGISTRATION FORM ANY TIME BETWEEN 4/1-4/15 to afterschool@abgclub.org

CHILD INFORMATION:

Child's Name: _____ School as of 9/24: _____ Grade as of 9/24: _____

Date of Birth: _____ Home Address: _____ Zip Code: _____

Child's Identifying Information Primary Language spoken at home: _____

Eye Color _____ Hair Color _____ Gender _____ Height _____ Weight _____ Skin Color _____

Identifying Marks _____

Is there documentation of a physical exam, immunization record, and lead screening on file at child's school?

Yes ___ No ___. Please note if your child is entering Kindergarten this needs to be on record by Sept. 2024

PLEASE CHECK YOUR PREFERENCE VAN TRANSPORT _____ PARENT DROP OFF _____

Schedule Please check the days that apply

Mon Tue Wed Thu Fri **RATES ARE 10 EQUAL MONTHLY PAYMENTS**

5 days () () () () () **rate w/ van transport- \$650.00 rate for parent/guardian drop off \$560.00**

Mon Tue Wed Thu Fri

4 days () () () () () **rate w/ van transport- \$520.00 rate for parent/guardian drop off \$445.00**

Mon Tue Wed Thu Fri

3 days () () () () () **rate w/ van transport- \$420.00 rate for parent/guardian drop off \$360.00**

Mon Tue Wed Thu Fri

2 days () () () () () **rate w/ van transport- \$305.00 rate for parent/guardian drop off \$265.00**

PARENT/GUARDIAN INFORMATION: **BEST PHONE # TO CALL:** _____

Parent/Guardian Name _____ Parent/Guardian Name _____

Relationship to Child _____ Relationship to Child _____

Home Address _____ Home Address _____

Cell# _____ Home# _____ Cell# _____ Home # _____

Work # _____ Work # _____

Email Address _____ Email Address _____

ADDITIONAL INFORMATION:

Please list any special interests your child may have. _____

Is there any other information you would like us to know about your child?

I hereby give my permission for my child to join the Arlington Boys & Girls Club and to participate in all Club activities and acknowledge that my child is fit and capable of participating in these activities. I waive all rights for claims against the Arlington Boys & Girls Club, Inc. it's staff or Board of Directors for all damages or injuries, which may occur while my child participates in Club sponsored activities. I have received a copy of the Club policies and have read the rules and regulations of the Arlington Boys & Girls Club, Inc.

X _____

Parent/Guardian Signature-valid September 1, 2024-June 30, 2025